



## CITY OF SURPRISE VOLUNTEER APPLICATION

NAME: Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

ADDRESS: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

PHONE: Home \_\_\_\_\_ Cell \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ Email \_\_\_\_\_

*All information provided is held in the strictest confidence and is not for public release.*

**WHAT AREAS WOULD YOU BE INTERESTED IN VOLUNTEERING?** Please check all that apply.

**Parks & Recreation**

- ☐ Arts & Crafts
- ☐ Sports Programs
- ☐ Children's Activities
- ☐ Stadium Assistants

**Community Development**

- ☐ Information/Receptionist
- ☐ Office Assistant
- ☐ Assistant Planner
- ☐ Field Assistant

**Public Relations**

- ☐ Office Assistant
- ☐ Graphic Artist

**OTHER DEPT**

\_\_\_\_\_

**Senior Center**

- ☐ Senior Programs
- ☐ Van Driver

**City Court**

- ☐ Filing
- ☐ Data Proofing
- ☐ File Audits

**Fire Department**

- ☐ Office Assistant
- ☐ Crisis Response
- ☐ Fire Prevention

**Administration**

- ☐ Office Assistant
- ☐ Customer Service
- ☐ Finance Dept.
- ☐ Legal Dept.

**Police Department**

- ☐ Citizens Patrol
- ☐ Office Assistant
- ☐ Victim's Assistance Unit

**Special Events**

- ☐ Volunteer Coordinator
- ☐ Staff/Office Assistant
- ☐ Activity Volunteer

**WHEN ARE YOU AVAILABLE TO VOLUNTEER?**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings							
Afternoons							
Evenings							

**MONTHS YOU ARE AVAILABLE:** \_\_\_\_\_

**WHAT SPECIAL INTERESTS, HOBBIES, SKILLS/TRAINING WOULD YOU LIKE TO SHARE?**

\_\_\_\_\_

**PRIOR VOLUNTEER EXPERIENCE:** \_\_\_\_\_

How did you become interested in our volunteer program?

- |                                    |   |   |  |
|------------------------------------|---|---|--|
| <input type="checkbox"/> Brochure  | <input type="checkbox"/> General Awareness              | <input type="checkbox"/> Volunteer Referral | <input type="checkbox"/> Community Event |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Volunteer Bureau/Organizations | <input type="checkbox"/> Friend Referral    | <input type="checkbox"/> Other _____     |

Do you have transportation to and from your volunteer job? YES or NO

Do you have any request for reasonable accommodations in order to perform your volunteer duties? YES or NO

**EMPLOYMENT EXPERIENCE:** Are you presently employed? (Check as many as apply)

\_\_\_\_ Employed Full Time      \_\_\_\_ Employed Part Time      \_\_\_\_ Unemployed      \_\_\_\_ Retired      \_\_\_\_ Student

CURRENT OR PREVIOUS EMPLOYER: Company Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Duties: \_\_\_\_\_

**EDUCATION:** High School Diploma or GED: YES or NO

College or University \_\_\_\_\_ Major \_\_\_\_\_ Degree Earned \_\_\_\_\_  
Graduate Studies \_\_\_\_\_ Major \_\_\_\_\_ Degree Earned \_\_\_\_\_

**REFERENCES:** Please list the names of two people to be contacted for character references:

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been convicted of a crime, regardless of whether the conviction was later set aside or expunged? "Crime" means all felonies, misdemeanors and serious offenses. Examples include, but are not limited to, DWI/DUI, reckless driving and criminal traffic offenses, etc. ☐ Yes ☐ No

Failure to report may render you ineligible to Volunteer. If yes, please explain: \_\_\_\_\_

Conviction Date	Conviction	Outcome	Misdemeanor	Felony	Brief Explanation
			<input type="checkbox"/>	<input type="checkbox"/>	

**EMERGENCY CONTACT INFORMATION:** Name: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*The City of Surprise is most grateful to those people who are willing to volunteer their time to assist the city through various volunteer programs. As a sign of the changing times, laws have been enacted to protect both the people we are serving and those honorable people who contribute their time as volunteers. This law requests that volunteers working in sensitive areas undergo procedures that may appear on the surface to be offensive to people giving their time and services. Please bear with us; we are simply taking precautions against the unscrupulous who may try to penetrate our ranks.*

**CONDITIONS:**

I fully understand, acknowledge and agree to the following:

Any or all of the following may be required before placement in any sensitive volunteer position:

- a. Background Investigation      b. Fingerprinting      c. Substance Abuse Testing

**Note: Sensitive areas include: working with youth (including Special Events); handling money; working in areas with access to confidential files.**

All statements made in this application are true and authorization is given to investigate all matters contained in the application. Any false statements or misrepresentation on this application will be cause for refusal of placement or dismissal at any time during my placement.

Signature of Volunteer Applicant \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Parent/Guardian (if volunteer is a minor) \_\_\_\_\_ Date \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Please Return To:**  
**Surprise Volunteer Program**  
15832 N. Hollyhock St.  
Surprise, AZ 85378  
Phone: 623.222.1500

**Office Use:**  
Date Received: \_\_\_\_\_ Fingerprinted: \_\_\_\_\_  
Interviewed: \_\_\_\_\_ References: \_\_\_\_\_  
Department & Supervisor: \_\_\_\_\_  
Database Entry: \_\_\_\_\_ Orientation: \_\_\_\_\_